

PERSONAL DATA SHEET

WARNING: Any misinterpretation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.**

1. CS ID No. (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

| | | | |
|-------------------------------|---|--------------------------------|--|
| 2. SURNAME | CAPACAO | | |
| FIRST NAME | RODA | NAME EXTENSION (JR., SR) | NA |
| MIDDLE NAME | CAPACAO | | |
| 3. DATE OF BIRTH (mm/dd/yyyy) | 13/07/1993 | 16. CITIZENSHIP | <input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input checked="" type="checkbox"/> by birth <input checked="" type="checkbox"/> by naturalization Pls. indicate country: |
| 4. PLACE OF BIRTH | TABGAS ALBUERA LEYTE | If holder of dual citizenship, | Philippines |
| 5. SEX | <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female | NA | |
| 6 CIVIL STATUS | <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s: | 17. RESIDENTIAL ADDRESS | NA NA GRAND ROYALE LUGAM Subdivision/Village Barangay MALOLOS BULACAN City/Municipality Province |
| 7. HEIGHT (m) | 5'3FT | ZIP CODE | 3000 |
| 8. WEIGHT (kg) | 50KG | 18. PERMANENT ADDRESS | NA NA House/Block/Lot No. Street NA MARCOS Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province |
| 9. BLOOD TYPE | NA | ZIP CODE | 6521 |
| 10. GSIS ID NO. | NA | 19. TELEPHONE NO. | NA |
| 11. PAG-IBIG ID NO. | NA | 20. MOBILE NO. | 09456038835 |
| 12. PHILHEALTH NO. | 21-025350978-8 | 21. E-MAIL ADDRESS (if any) | capacaoroda@gmail.com |
| 13. SSS NO. | 02-3948470-1 | | |
| 14. TIN NO. | 479-324-870 | | |
| 15. AGENCY EMPLOYEE NO. | 15-1202 | | |

II. FAMILY BACKGROUND

| | | | | |
|--------------------------|-----------|--------------------------|---|----------------------------|
| 22. SPOUSE'S SURNAME | NA | | 23. NAME OF CHILDREN (Write full name and list all) | DATE OF BIRTH (mm/dd/yyyy) |
| FIRST NAME | NA | NAME EXTENSION (JR., SR) | NA | NA |
| MIDDLE NAME | NA | | NA | NA |
| OCCUPATION | NA | | | |
| EMPLOYER/BUSINESS NAME | NA | | | |
| BUSINESS ADDRESS | NA | | | |
| TELEPHONE NO. | NA | | | |
| 24. FATHER'S SURNAME | CAPACAO | | | |
| FIRST NAME | MAXIMO | NAME EXTENSION (JR., SR) | | |
| MIDDLE NAME | MISPEROS | | | |
| 25. MOTHER'S MAIDEN NAME | | | | |
| SURNAME | GONATO | | | |
| FIRST NAME | DIVINA | | | |
| MIDDLE NAME | BAGARINAO | | (Continue on separate sheet if necessary) | |

III. EDUCATIONAL BACKGROUND

| 26. LEVEL | NAME OF SCHOOL (Write in full) | BASIC EDUCATION/DEGREE/COURSE (Write in full) | PERIOD OF ATTENDANCE | | HIGHEST LEVEL/ UNITS EARNED (if not graduated) | YEAR GRADUATED | SCHOLARSHIP/ ACADEMIC HONORS RECEIVED |
|---------------------------|---|--|----------------------|---------|--|----------------|---------------------------------------|
| | | | From | To | | | |
| ELEMENTARY | PANGASUGAN ELEMENTARY SCHOOL | ELEMENTARY DIPLOMA | 2001 | 2007 | NA | 2007 | 3RD HONOURABLE MENTION |
| SECONDARY | ALTERNATIVE LEARNING SYSTEM | HIGH SCHOOL DIPLOMA | 2007 | 2010 | NA | 2010 | 4TH PLACE |
| VOCATIONAL / TRADE COURSE | NA | NA | NA | NA | NA | NA | NA |
| COLLEGE | VISAYAS STATE UNIVERSITY | CERTIFICATE OF SCIENCE IN AGRICULTURE | 2011 | 2013 | NA | 2015 | HIGH HONOR/ COLLEGE SCHOLAR |
| | | BACHELOR OF SCIENCE IN AGRICULTURE | 2011 | 2015 | NA | 2015 | CUM LAUDE/ GAWAD PATNUBAY SCHOLAR |
| GRADUATE STUDIES | UNIVERSITY OF THE PHILIPPINES LOS BAÑOS | MS PLANT PATHOLOGY, COGNATE IN AGRONOMY - WEED SCIENCE | Jan. 2018 | PRESENT | 24 UNITS | NA | NA |

(Continue on separate sheet if necessary)


| | | | |
|-----------|-------------------|------|-----------------|
| SIGNATURE | <i>R. Capacao</i> | DATE | AUGUST 31, 2021 |
|-----------|-------------------|------|-----------------|

| IV. CIVIL SERVICE ELIGIBILITY | | | | | | |
|-------------------------------|--|---------------------------|--|-----------------------------------|-------------------------|---------------------|
| 27. | CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE | RATING (If Applicable) | DATE OF EXAMINATION / CONFERMENT | PLACE OF EXAMINATION / CONFERMENT | LICENSE (if applicable) | |
| | | | | | NUMBER | Date of Validity |
| | HONOR GRADUATE ELIGIBILITY (PD 907) | NA | NA | NA | 100108150381 | NA |
| | AGRICULTURIST LICENSURE EXAMINATION | NA | 22/06/2015 | TACLOBAN CITY | 0022430 | 13/07/2018 |
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V. WORK EXPERIENCE
(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

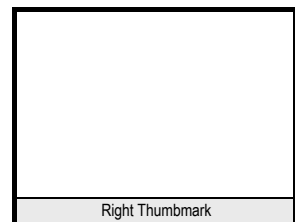
| | | | | |
|---|------------------|------|-----------------|--|
| (Continue on separate sheet if necessary) | | | | |
| SIGNATURE | <i>J Capraeo</i> | DATE | AUGUST 31, 2021 | |

| VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S | | | | | | |
|--|---|--|-------------|-----------------|---|--|
| 29. | NAME & ADDRESS OF ORGANIZATION (Write in full) | INCLUSIVE DATES (mm/dd/yyyy) | | NUMBER OF HOURS | POSITION / NATURE OF WORK | |
| | | From | To | | | |
| NA | NA | NA | NA | NA | NA | |
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| (Continue on separate sheet if necessary) | | | | | | |
| VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED | | | | | | |
| (Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions) | | | | | | |
| 30. | TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full) | INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy) | | NUMBER OF HOURS | Type of LD (Managerial/ Supervisory/ Technical/etc) | CONDUCTED/ SPONSORED BY (Write in full) |
| | | From | To | | | |
| | 29TH NATIONAL RICE R&D CONFERENCE | 07/09/2016 | 08/09/2016 | | | PHILIPPINE RICE RESEARCH INSTITUTE |
| | BASIC GEOGRAPHIC INFORMATION SYSTEM (GIS) TRAINING-WORKSHOP FOR PHILRICE RESEARCHERS | 15/11/2016 | 18/11/2016 | | | PHILIPPINE RICE RESEARCH INSTITUTE |
| | HEALTH RISKS OF RICE FARMING | 13/01/2016 | 13/01/2016 | | | PHILIPPINE RICE RESEARCH INSTITUTE |
| | RE-DESIGNING IRRI'S IRRIGATED BREEDING PROGRAM | FEB 00 2016 | FEB 00 2016 | | | PHILIPPINE RICE RESEARCH INSTITUTE |
| | EDUCATION TO EMPLOYMENT INTERNSHIP PROGRAM | 14/09/2015 | 20/11/2015 | | | LANDBANK OF THE PHILIPPINES AND PHILIPPINE RICE RESEARCH INSTITUTE |
| | RICE: RESEARCH TO PRODUCTION COURSE | 10/08/2015 | 28/08/2015 | | | INTERNATIONAL RICE RESEARCH INSTITUTE |
| | 46TH ANNIVERSARY AND ANNUAL SCIENTIFIC CONFERENCE OF THE PEST MANAGEMENT COUNCIL IN THE PHILIPPINES | 05/05/2015 | 08/05/2015 | | | PEST MANAGEMENT COUNCIL IN THE PHILIPPINES |
| | SUMMER FIELD PRACTICUM | | | | | VISAYAS STATE UNIVERSITY |
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| (Continue on separate sheet if necessary) | | | | | | |
| VIII. OTHER INFORMATION | | | | | | |
| 31. | SPECIAL SKILLS and HOBBIES | 32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full) | | | 33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full) | |
| | READING SCIENTIFIC REPORTS | PMCP-BAYER CROP SCIENCE BEST UNDERGRADUATE THESIS AWARD IN WEED SCIENCE | | | PHILIPPINE ASSOCIATION OF AGRICULTURIST | |
| | WRITING RESEARCH PAPERS | PRESENTED A POSTER IN THE 29TH NATIONAL RICE R&D CONFERENCE ENTITLED "MORPHOLOGICAL VARIABILITY OF THE RICE BLAST PATHOGEN (<i>Magnaporthe grisea</i>) IN THE PHILIPPINES" | | | | |
| | EXPLORING SCIENTIFIC IDEAS | | | | | |
| | PLAYING SPORTS | | | | | |
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| | | | | | | |
| (Continue on separate sheet if necessary) | | | | | | |
| SIGNATURE | |  | | DATE | AUGUST 31, 2022 | |

| <p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed,</p> <p>a. within the third degree?</p> <p>b. within the fourth degree (for Local Government Unit - Career Employees)?</p> | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> | | | | | | | | | | | | | | |
|--|--|------------|--|----------|-----------------------|---|--------------|--------------------|---------------------------|-------------|--|--|---------------------------------|-----------------|-------------------|
| <p>35. a. Have you ever been found guilty of any administrative offense?</p> <p>b. Have you been criminally charged before any court?</p> | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <hr/> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Date Filed: _____</p> <p style="text-align: right;">Status of Case/s: _____</p> | | | | | | | | | | | | | | |
| <p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p> | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> | | | | | | | | | | | | | | |
| <p>37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?</p> | <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p style="text-align: right;">Finished contract</p> | | | | | | | | | | | | | | |
| <p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?</p> <p>b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?</p> | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details: _____</p> | | | | | | | | | | | | | | |
| <p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p> | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, give details (country): _____</p> | | | | | | | | | | | | | | |
| <p>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:</p> <p>a. Are you a member of any indigenous group?</p> <p>b. Are you a person with disability?</p> <p>c. Are you a solo parent?</p> | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify: _____</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, please specify ID No: _____</p> | | | | | | | | | | | | | | |
| <p>41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 35%;">ADDRESS</th> <th style="width: 30%;">TEL. NO.</th> </tr> </thead> <tbody> <tr> <td>TERESITA U. DALISAY</td> <td>UNIVERSITY OF THE PHILIPPINES LOS BAÑOS</td> <td>9952203275</td> </tr> <tr> <td>LUALHATI M. NORIEL</td> <td>VISCA, BAYBAY CITY, LEYTE</td> <td>9187755627</td> </tr> <tr> <td>FE A. DELA PEÑA</td> <td>PHILIPPINE RICE RESEARCH INSTITUTE (RETIRED)</td> <td>9433479934</td> </tr> </tbody> </table> | | NAME | ADDRESS | TEL. NO. | TERESITA U. DALISAY | UNIVERSITY OF THE PHILIPPINES LOS BAÑOS | 9952203275 | LUALHATI M. NORIEL | VISCA, BAYBAY CITY, LEYTE | 9187755627 | FE A. DELA PEÑA | PHILIPPINE RICE RESEARCH INSTITUTE (RETIRED) | 9433479934 | | |
| NAME | ADDRESS | TEL. NO. | | | | | | | | | | | | | |
| TERESITA U. DALISAY | UNIVERSITY OF THE PHILIPPINES LOS BAÑOS | 9952203275 | | | | | | | | | | | | | |
| LUALHATI M. NORIEL | VISCA, BAYBAY CITY, LEYTE | 9187755627 | | | | | | | | | | | | | |
| FE A. DELA PEÑA | PHILIPPINE RICE RESEARCH INSTITUTE (RETIRED) | 9433479934 | | | | | | | | | | | | | |
| <p>42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.</p> | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.)</td> </tr> <tr> <td colspan="2">PLEASE INDICATE ID Number and Date of Issuance</td> </tr> <tr> <td>Government Issued ID:</td> <td>SSS ID</td> </tr> <tr> <td>License No.:</td> <td>0111-7291310-5</td> </tr> <tr> <td>Date/Place of Issuance:</td> <td>Baguio City</td> </tr> </table> | Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) | | PLEASE INDICATE ID Number and Date of Issuance | | Government Issued ID: | SSS ID | License No.: | 0111-7291310-5 | Date/Place of Issuance: | Baguio City | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 10px;"> </td> </tr> <tr> <td style="text-align: center;">Signature (Sign inside the box)</td> </tr> <tr> <td style="text-align: center;">AUGUST 31, 2022</td> </tr> <tr> <td style="text-align: center;">Date Accomplished</td> </tr> </table> | | Signature (Sign inside the box) | AUGUST 31, 2022 | Date Accomplished |
| Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) | | | | | | | | | | | | | | | |
| PLEASE INDICATE ID Number and Date of Issuance | | | | | | | | | | | | | | | |
| Government Issued ID: | SSS ID | | | | | | | | | | | | | | |
| License No.: | 0111-7291310-5 | | | | | | | | | | | | | | |
| Date/Place of Issuance: | Baguio City | | | | | | | | | | | | | | |
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| Signature (Sign inside the box) | | | | | | | | | | | | | | | |
| AUGUST 31, 2022 | | | | | | | | | | | | | | | |
| Date Accomplished | | | | | | | | | | | | | | | |
| <p style="text-align: center;">SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.</p> <div style="border: 1px solid black; width: 300px; height: 60px; margin: 10px auto;"></div> <div style="border: 1px solid black; width: 300px; height: 60px; margin: 10px auto; text-align: center;"> <p>Person Administering Oath</p> </div> | | | | | | | | | | | | | | | |



PHOTO



Right Thumbmark